

CONTRA COSTA HEALTH SERVICES

_____ **HEALTH CENTER**

OUTPATIENT NOTES

DATE

WeCAN Group Appointment Progress Note	
_____ Session 1	_____ Session 2
_____ Session 3	_____ Session 4
_____ Session 5	
PCP: _____	
Subjective:	
What would you like to learn today?	
How confident are you to make a change towards being healthier?	
(Not ready) 0 1 2 3 4 5 6 7 8 9 10 (Ready)	
Objective:	
Age: _____ (Wt: _____ kg/lbs Ht: _____ cm/in Date: _____) (BMI _____ BMI% _____ Date: _____)	
BP _____	
PMH: _____ Asthma _____ HTN _____ DM _____ Pre-DM _____ Hypothyroidism _____ NAFLD	
_____ Dev delay _____ Dental caries	
General:	
Skin: acanthosis nigricans _____ Y _____ N	
Lungs:	
CV:	
Other:	
Labs: FBG _____ Date: _____ AIC _____ Date: _____ ALT/AST _____ Date: _____	
Fasting Lipids: Date _____ Total Chol _____ Trig _____ HDL _____ LDL _____	
Assessment:	
1. Overweight (85-94%-ile) _____ Obese (≥95%-ile) _____ Morbidly Obese(≥99%-ile) _____	
Plan:	
Discussed: _____ 1. Prevalence of childhood obesity and it's health complications; Amount of sugar in sweetened drinks; Amount of fat in different kinds of milk.	
_____ 2. Parents are models for their children in supporting a healthy lifestyle, are responsible for setting limits; Benefits of daily physical activity, limit on screen time	
_____ 3. Healthy food choices, appropriate portion size for children, label reading, cooking demo	
_____ 4. Immigration, Obesity and Exercise; Healthy coping skills for stress instead of eating	
_____ 5. Review	
Action Plan:	
Signature:	